

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720638

FILED
Jan 14, 2009
Secretary of State

Entity Name: MAINLANDS SECTION THREE ASSOCIATION,INC.

Current Principal Place of Business:

4401 NW 46 STREET
TAMARAC, FL 33319

New Principal Place of Business:

4300 NW 46 STREET
TAMARAC, FL 33319

Current Mailing Address:

4401 NW 46 STREET
TAMARAC, FL 33319

New Mailing Address:

FEI Number: 59-1444564 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLIAKOFF, GARY A J.D.
BECKER & POLIAKOFF, P.A.
3111 STIRLING ROAD
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VILLELLA, WILLIAM
Address: 4605 NW 45TH STREET
City-St-Zip: TAMARAC, FL 33319

Title: VD () Delete
Name: FIRN, LARRY
Address: 4300 NW 43RD AVENUE
City-St-Zip: TAMARAC, FL 33319

Title: VD () Delete
Name: WILLARETH, KENNETH
Address: 4401 NW 43RD AVENUE
City-St-Zip: TAMARAC, FL 33319

Title: SD () Delete
Name: EHRLICH, GLADYS
Address: 4401 NW 46TH STREET
City-St-Zip: TAMARAC, FL 33319

Title: TD () Delete
Name: WATSON, ANNA MARIE
Address: 4404 NW 45TH COURT
City-St-Zip: TAMARAC, FL 33319

Title: TD () Delete
Name: VILLELLA, LINDA
Address: 4605 NW 45TH STREET
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: EHRLICH, SANDY H
Address: 4401 NW 46TH ST.
City-St-Zip: TAMARAC, FL 33319

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDY H. EHRLICH

TD

01/14/2009

Electronic Signature of Signing Officer or Director

Date